Rule Summary and Fiscal Analysis
Part A - General Questions

Rule Number: 4123-6-21.3

Rule Type: Amendment

Rule Title/Tagline: Outpatient medication formulary.

Agency Name: Bureau of Workers' Compensation

Division:

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I. Rule Summary

1. **Is this a five year rule review?** No

    A. **What is the rule's five year review date?** 5/1/2025

2. **Is this rule the result of recent legislation?** No

3. **What statute is this rule being promulgated under?** 119.03

4. **What statute(s) grant rule writing authority?** 4121.12, 4121.121, 4121.30, 4121.31, 4121.44, 4121.441, 4123.05, 4123.66

5. **What statute(s) does the rule implement or amplify?** 4121.12, 4121.121, 4121.44, 4121.441, 4123.66

6. **What are the reasons for proposing the rule?**

    BWC initially adopted rule OAC 4123-6-21.3 effective September 1, 2011 to establish an outpatient medication formulary. A formulary is a list of drugs approved for reimbursement when prescribed to treat conditions allowed in the claim. The formulary is maintained, and updated periodically, by BWC with input from the BWC Pharmacy & Therapeutics Committee (P&T Committee) pursuant to its responsibilities as set forth in OAC 4123-6-21.2.

7. **Summarize the rule's content, and if this is an amended rule, also summarize the rule's changes.**

   This rule establishes the outpatient medication formulary list of drugs approved for reimbursement when prescribed to treat conditions allowed in a claim filed by an injured worker.
   The proposed changes are as follow:
   MEDICATIONS TO BE ADDED TO THE FORMULARY
   • Nintedanib 100 mg, 150 mg capsules with prior authorization
   • Buprenorphine/naloxone 2 mg/0.5 mg, 8 mg/2 mg sublingual films: restricted to use in claims with an allowed condition of opioid use disorder or as part of approved treatment under OAC 4123-6-21.8. Maximum dose of 2 films per day.
   • Aluminum & Magnesium Hydroxides Susp 200-200 MG/5ML
   • Artificial Saliva - Solution
   • Ascorbic Acid Liquid 500 MG/5ML
   • Brompheniramine & Phenylephrine Elixir 1-2.5 MG/5ML
   • Calcium Gluconate Cap 500 MG
   • Dalteparin Sodium Inj 95000 Unit/3.8ML
   • Dulaglutide Soln Pen-injector 3 MG/0.5ML
   • Everolimus tablet 1mg
   • Insulin Lispro Soln Pen-injector 100 Unit/ML (1 Unit Dial)
   • Menthol-Methyl Salicylate Patch
   • Potassium Iodide Oral Soln 1 GM/ML
   • Pseudoephedrine w/ COD-GG Soln 30-10-100 MG/5ML
   • Pseudoephedrine HCl Liq 30 MG/5ML
   MEDICATIONS WITH CHANGES IN COVERAGE
   • Buprenorphine/naloxone SL tablets: maximum of two tablets per day

8. **Does the rule incorporate material by reference?** No

9. **If the rule incorporates material by reference and the agency claims the material is exempt pursuant to R.C. 121.75, please explain the basis for the exemption and how an individual can find the referenced material.**

   Not Applicable

10. **If revising or re-filing the rule, please indicate the changes made in the revised or re-filed version of the rule.**

    Not Applicable

II. Fiscal Analysis

11. **Please estimate the increase / decrease in the agency's revenues or expenditures in the current biennium due to this rule.**

    This will have no impact on revenues or expenditures.

    0.00

    Not Applicable.

12. **What are the estimated costs of compliance for all persons and/or organizations directly affected by the rule?**

    The prescriber and pharmacy business communities are the only two business communities involved with medication prescribing and dispensing and affected by this rule. There should be no negative financial impact on the prescriber community as any necessary changes to the injured worker's drug regimen should be done in the context of routine office visits. Any prescriptions that result from the changes in the drug regimen would continue to be processed by a pharmacy.

13. **Does the rule increase local government costs? (If yes, you must complete an RSFA Part B).** No

14. **Does the rule regulate environmental protection? (If yes, you must complete an RSFA Part C).** No

15. **If the rule imposes a regulation fee, explain how the fee directly relates to your agency's cost in regulating the individual or business.**

    Not Applicable.

III. Common Sense Initiative (CSI) Questions

16. **Was this rule filed with the Common Sense Initiative Office?** Yes

17. **Does this rule have an adverse impact on business?** Yes

    A. **Does this rule require a license, permit, or any other prior authorization to engage in or operate a line of business?** No

    B. **Does this rule impose a criminal penalty, a civil penalty, or another sanction, or create a cause of action, for failure to comply with its terms?** No

C. Does this rule require specific expenditures or the report of information as a condition of compliance? Yes

The proposed rule requires that clinical documentation and evidence of medical necessity be provided to the BWC for short term reimbursement of new drugs or new dosage forms or strengths of existing drugs approved for use in the United Sates by the FDA on or after the effective date of the rule.

D. Is it likely that the rule will directly reduce the revenue or increase the expenses of the lines of business of which it will apply or applies? No

IV. Regulatory Restrictions (This section only applies to agencies indicated in R.C. 121.95 (A))

18. Are you adding a new or removing an existing regulatory restriction as defined in R.C. 121.95? Yes

A. How many new regulatory restrictions do you propose adding? 1

4123-6-21.3 Appendix - "require"

B. How many existing regulatory restrictions do you propose removing? 2

4123-6-21.3 Appendix - "shall"

4123-6-21.3 Appendix - "required"